This form is approved by the Illinois Supreme Court and is required to be accepted in all Illinois Circuit Courts.

STATE OF ILL CIRCUIT CO		NOTICE OF F EXPUNGEMENT			ırt Use Only		
Instructions ▼ Enter above the county name where you will file this case.	Request of:						
Enter your name, birth date, race, and gender.	Your name	(First, middle, last name)		_			
Select the type of Request you are filing.	Date of birt	h Race	Gender				
If the Clerk gave you a new case number, enter it to the right.	Request for	: □ Expungement	☐ Sealing		Number (if the os a new number)	Clerk	
Enter the number for the eligible arrests, charges, and convictions on your criminal record in this county. If an arrest did not result in formal charges, enter the arrest number	Arrest or C	ase Numbers of all 9`][]V	°Y'Criminal Offe	enses cb your f	Record in this	County:	
This form can be used with <i>Requests</i> for expungement or sealing.	1. To :	County or Municipality Name		County State's Attorney or			
In 1, enter the State's Attorney or Municipal Prosecutor office that prosecuted your cases.		Municipal Prosecutor Office Street Address	e: 	City	State	710	
In 2, enter the local police agencies that arrested you. If you run out of space, use the Additional Notice of Filing for Expungement or Sealing form and check the box.		Street Address City State ZIP Arresting Agencies that arrested you:					
	_	Name Na		Name	ame		
	- ;	Street Address St		Street Address	reet Address		
In 3, enter the names		City State	ZIP	City	State	ZIP	
and addresses of the Chief Legal Officer of the Unit of Local Government that	[I have listed additional Arresting Agencies on the attached Additional Notice of Filing for Expungement or Sealing form.					
arrested you. The Chief Legal Officer is usually the lawyer for the city or town in which you	3. To:	Chief Legal Officers of the Units of Local Government that arrested you:					
	-	Name		Name			
were arrested or, in some cases, if you were arrested by the sheriff it	-;	Street Address		Street Address			
is the State's Attorney for that county.		City State	ZIP	City	State	ZIP	
If you run out of space, use the Additional Notice of Filing for Expungement or Sealing form and check the box.]	I have listed additional Chief Legal Officers on the attached Additional Notice of Filing for Expungement or Sealing form.					

	4. To: Illinois State Police 260 North Chicago Street Joliet, Illinois 60432								
In 5, select the type of Request you are filing and enter the name of the county where you are filing your Request.	 I have filed a: Request to Expunge & Impound Criminal Records Request to Seal Criminal Records 								
							with the Clerk of the Circuit Court of	County Name	ounty, Illinois.
								6. The Circuit Court Clerk will mail a coplisted above in sections 1 - 4.	by of this <i>Notice</i> and the <i>Request</i> to all of the
	After you finish this form, sign it, and enter the date.								
	Your Signature	Date							
	Prepared by:								
Enter your name, address, and phone number.	Street Address:								
	City, State, ZIP:								
Leave Attorney No. blank if an attorney did	Phone Number:								
not fill out form.	Attorney No.:								
	CERT	FICATE OF MAILING							
DO NOT fill out this									
section. The Circuit Clerk will sign and	The undersigned certifies that the above Notice and attached documents were placed in the U.S.								
mail it.	Mail with first class postage prepaid to all parties listed above.								
	Signature of Circuit Clerk	Name of Deputy Clerk							

Enter the Case Number given by the Circuit Clerk: